## Commonwealth of Kentucky Personnel Cabinet

# Health Insurance Program Monthly Report



Prepared for:

# Kentucky Group Health Insurance Board Members

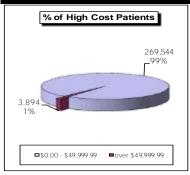
**May 2012** 

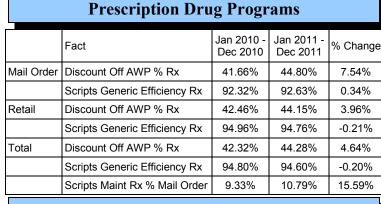
#### DASHBOARD REPORT: BASED ON INCURRED CLAIMS

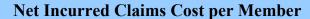
Includes Projections for Incurred, but Not Yet Reported (IBNR or CMPL)

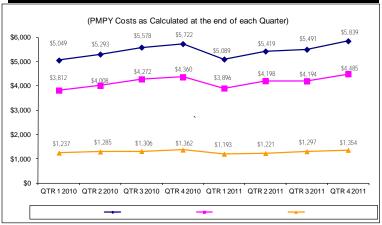
#### **Enrollment** Jan 2011 -Jan 2010 -% Change Fact Dec 2011 Dec 2010 159.547 -0.27% Employees Avg Med 159.121 Members Avg Med 270,427 265,876 1.71% Family Size Avg 1.7 1.7 1.98% 37.7 Member Age Avg 37.9 -0 40%

# High Cost Claimants December 10 – December 11

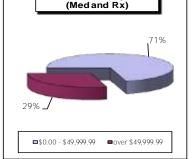




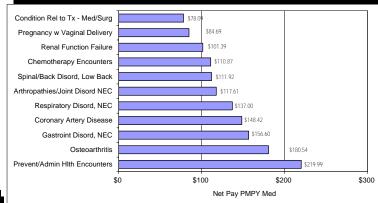




## % of Total Net Payments



## **Top 10 Clinical Conditions**



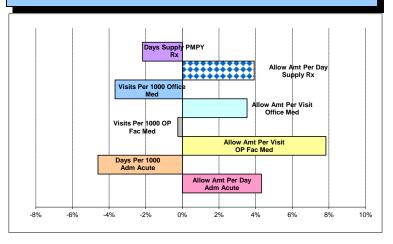
#### **Allowed Claims Costs PMPY with Norms**

	Jan 2010 - Dec 2010	Jan 2011 - Dec 2011	% Change	Recent US Norm	Comp to Norm
Allow Amt PMPY Med (Cmpl)	\$4,623.58	\$4,781.53	3%	\$4,008.11	16%
Allow Amt PMPY IP Acute (Cmpl)	\$4,024.16	\$4,008.11	0%	N/A	N/A
Allow Amt PMPY OP Med (Cmpl)	\$0.15	\$0.19	30%	\$2,727.59	21%
Allow Amt PMPY OP Fac Med (Cmpl)	\$1,314.75	\$1,320.41	0%	N/A	N/A
Allow Amt PMPY Office Med (Cmpl)	\$3,287.02	\$3,443.60	5%	\$0.00	N/A
Allow Amt PMPY OP Lab (Cmpl)	\$2,739.16	\$2,727.59	0%	\$0.00	N/A
Allow Amt PMPY OP Rad (Cmpl)	\$0.20	\$0.26	31%	\$0.00	N/A
Out of Pocket PMPY Med (Cmpl)	\$1,728.88	\$1,868.72	8%	\$508.95	-2%
Allow Amt PMPY Rx (Cmpl)	\$956.39	\$958.23	0%	\$1,015.22	35%
Out of Pocket PMPY Rx (Cmpl)	\$293.46	\$318.11	8%	\$0.00	N/A

## **Cost Drivers Support**

Fact	Jan 2010 - Dec 2010	Jan 2011 - Dec 2011	% Change
Allow Amt Per Day Adm Acute	\$3,766.58	\$3,929.10	4.31%
Days Per 1000 Adm Acute	337.41	321.87	-4.61%
Allow Amt Per Visit OP Fac Med	\$928.46	\$1,001.21	7.84%
Visits Per 1000 OP Fac Med	1,862.10	1,857.50	-0.25%
Allow Amt Per Visit Office Med	\$110.67	\$114.58	3.53%
Visits Per 1000 Office Med	8,641.72	8,324.00	-3.68%
Allow Amt Per Day Supply Rx	\$2.51	\$2.61	3.92%
Days Supply PMPY Rx	607.17	593.97	-2.17%
	2		

## **Cost Drivers—Utilization and Price Trends**



# **Table of Contents**

Introduction.	4
Overview	4
Definitions	5
Enrollment	6-8
Claims Costs	9-15
Medical Claims Utilization	16
Analysis of Deductibles	17-18
Analysis of Individuals and Families Meeting their Out of Pocket Expenses	19-22
Premium (or Premium Equivalent)	23
Rx Utilization	
Utilization	
Claims Lag Analysis	31-32
Claims Distribution based on Age/Gender	33
Allowed Amount Distribution	34
Summary of Enrollment and Claims	

## Introduction

The Department of Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees' Health Plan. In response to requests for data analysis, this report has been prepared to provide information related to enrollment, claims payment, and utilization.

It is the Department's intent to update this information on a monthly basis in an effort to provide current information about Kentucky's Health Insurance Program.

## **Overview**

This report is compiled using Medstat, which is DEI's health insurance information management system. Medstat warehouses enrollment and claims data. Enrollment data is provided by DEI while claims data is provided by each carrier and/or TPA.

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

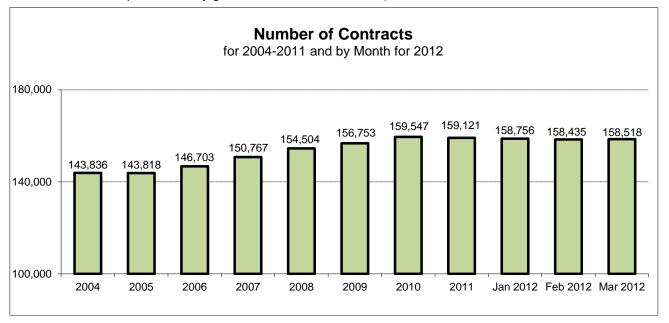
Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding dependents, dropping dependents, marriage, divorce, becoming Medicare eligible, etc. Therefore, Medstat is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2006 Medstat processed enrollment information for a total of 258,809 members as well as 7,973,124 claims (3,96,007 Medical claims and 4,584,166 prescriptions) from different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Medstat.

## **Definitions**

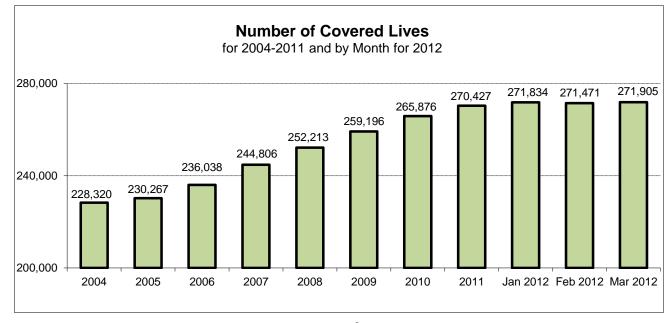
- **Employee** represents an individual eligible to participate in KEHP as a retiree in either KTRS or KRS, or by being employed by one of the agencies that participate with KEHP (example: state employee, school boards, Quasi agency, etc.). Employee may also be referred to as "planholder" or "contracts". Please note that Medstat deals with Cross-reference plans uniquely. Although there are in fact two "employees" Medstat can only designate the planholder as an employee. Therefore, the cross-referenced spouse is considered a dependent and all claims and utilization data related to them is counted as a "member".
- **Member** includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as "covered lives".
- **Group** is Kentucky Retirement System (KRS), Kentucky Teachers Retirement System (KTRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, Quasi/Local Governments).
- *Plan* is Standard PPO, Capitol Choice, Optimum PPO, Maximum Choice, Commonwealth Essential, Commonwealth Enhanced, Commonwealth Premier, or Commonwealth Select.
- *Carrier* may be Aetna, Anthem, Bluegrass Family Health, CHA Health, United Healthcare, or Humana (please note that Express Scripts data is designated as Humana).
- **Generic Efficiency** means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- *OOP* is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- Allowed Amount is the amount of submitted charges eligible for payment for all claims. It is the amount eligible
  after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible
  amounts.
- **Net Payment** is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- Patients is the unique count of members who received facility, professional, or pharmacy services.
- **Days Supply** is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- **Mail Order** is computed as any script filled with a "days supply" of more than 30 days, regardless of the physical location where the prescription was filled.
- **Retail** is computed as any script filled with a "days supply" of 30 days or less, regardless of the physical location where the prescription was filled.

## **Enrollment**

The following chart shows planholder enrollment (contracts) for 2004-2011 and monthly year-to-date for 2012. Enrollment will fluctuate on a monthly basis (Approximately 8,000 cross-referenced spouses in any given month are not included)

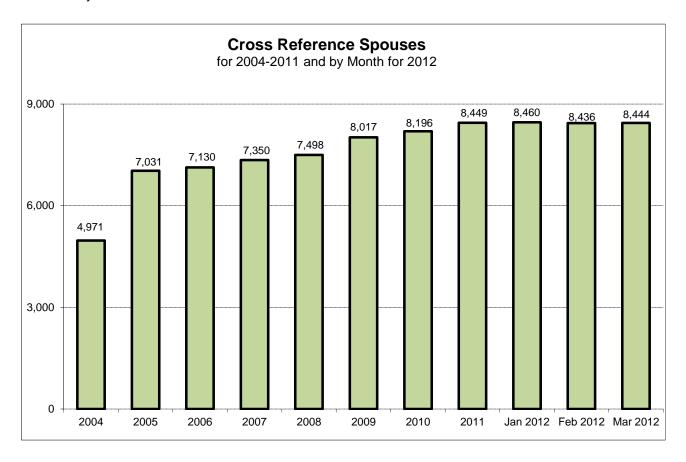


The following chart shows member enrollment (covered lives) for 2004-2011 and monthly year-to-date for 2012. Enrollment will fluctuate on a monthly basis.



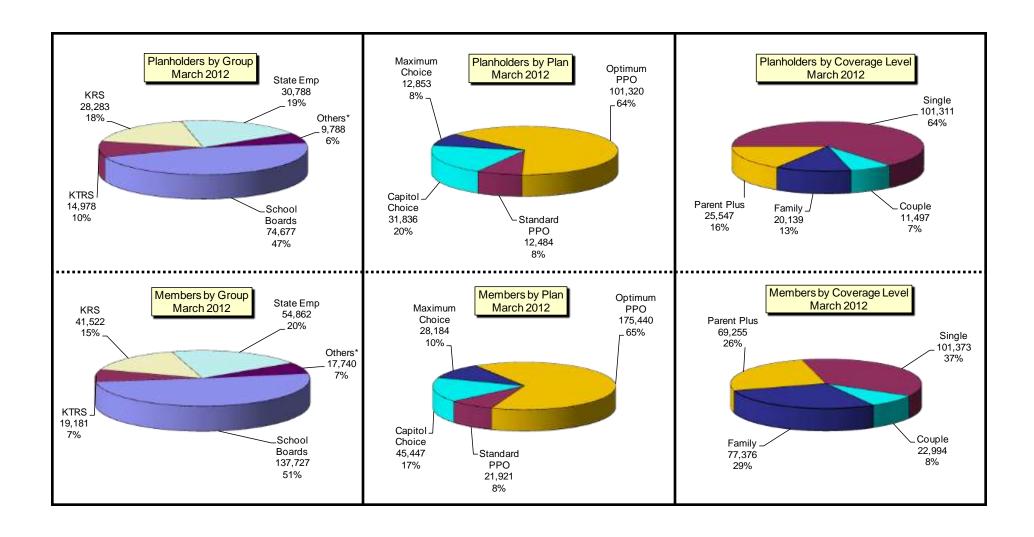
## **Enrollment** (continued)

The following graph shows the number of cross-reference spouses for 2004-2011 and monthly year-to-date for 2012. The number of Cross Referenced Spouses will fluctuate on a monthly basis.



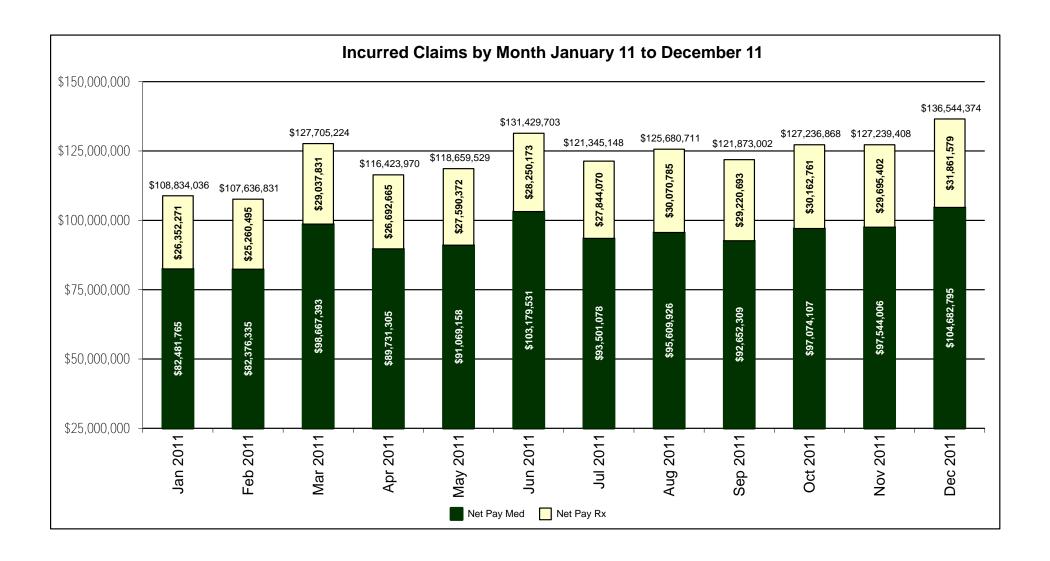
## Enrollment (continued)

The following charts show Planholder and Member enrollment by group, plan, and coverage level.



## **Claims Costs**

Claims costs include Medical and Prescription (Rx) for the most recent rolling year. Based on Incurred Claims.



The following tables represent incurred claims by Group for 2004 - 2010 and monthly year-to-date for 2011.

#### **INCURRED MEDICAL CLAIMS (no Rx) by Group:**

	School Boards	KTRS	KRS	State Employees	Others	Totals
2004	\$246,147,555	\$70,821,610	\$105,467,391	\$123,091,625	\$44,876,807	\$590,404,988
2005	\$258,583,635	\$80,446,325	\$122,103,230	\$127,041,805	\$47,167,061	\$635,342,056
2006	\$307,404,829	\$93,874,833	\$147,000,881	\$151,118,572	\$48,943,683	\$748,342,797
2007	\$335,233,747	\$96,138,953	\$156,119,263	\$147,816,830	\$50,969,860	\$786,278,653
2008	\$402,843,851	\$109,319,917	\$194,688,095	\$178,641,561	\$64,333,716	\$949,827,140
2009	\$427,644,878	\$123,944,338	\$220,434,791	\$177,195,445	\$68,628,440	\$1,017,847,892
2010	\$467,717,630	\$134,583,299	\$218,610,911	\$193,433,548	\$79,255,576	\$1,093,600,964
Jan 2011	\$33,283,400	\$11,253,855	\$17,784,920	\$15,038,443	\$5,121,147	\$82,481,765
Feb 2011	\$33,242,960	\$10,275,716	\$17,778,469	\$15,576,873	\$5,502,318	\$82,376,335
Mar 2011	\$39,858,842	\$12,582,743	\$21,209,355	\$17,775,613	\$7,240,841	\$98,667,393
Apr 2011	\$36,755,057	\$10,224,601	\$18,977,346	\$16,631,712	\$7,142,589	\$89,731,305
May 2011	\$38,127,351	\$10,542,236	\$18,058,229	\$16,960,946	\$7,380,396	\$91,069,158
Jun 2011	\$47,397,826	\$11,927,940	\$20,579,784	\$16,499,782	\$6,774,198	\$103,179,531
Jul 2011	\$41,298,748	\$10,429,005	\$19,721,728	\$15,944,133	\$6,107,463	\$93,501,078
Aug 2011	\$37,585,160	\$12,063,096	\$22,656,922	\$16,371,802	\$6,932,946	\$95,609,926
Sep 2011	\$37,559,316	\$11,477,363	\$20,252,771	\$16,544,522	\$6,818,337	\$92,652,309
Oct 2011	\$40,393,776	\$11,661,179	\$19,928,255	\$17,707,485	\$7,383,412	\$97,074,107
Nov 2011	\$40,776,298	\$12,866,435	\$20,285,190	\$15,897,750	\$7,718,333	\$97,544,006
Dec 2011	\$44,854,131	\$11,988,949	\$21,026,899	\$19,253,716	\$7,559,101	\$104,682,795

<sup>\*</sup> Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

The following tables represent incurred claims by Group for 2004 - 2010 and monthly year-to-date for 2011.

## INCURRED Rx CLAIMS (no Med) by Group:

	School Boards	KTRS	KRS	State Employees	Others	Totals
2004	\$65,369,460	\$24,608,695	\$34,687,723	\$32,464,692	\$11,366,382	\$168,496,952
2005	\$69,923,171	\$27,111,849	\$39,719,334	\$34,313,525	\$12,446,641	\$183,514,521
2006	\$92,676,509	\$35,017,335	\$53,095,577	\$42,857,791	\$13,481,498	\$237,128,711
2007	\$102,883,195	\$37,889,011	\$61,585,393	\$46,102,562	\$15,361,507	\$263,821,668
2008	\$114,318,657	\$42,211,258	\$72,457,449	\$51,523,178	\$17,638,869	\$298,149,411
2009	\$119,002,425	\$45,308,689	\$82,234,684	\$50,881,577	\$18,339,245	\$315,766,619
2010	\$129,648,222	\$49,401,586	\$89,784,561	\$55,130,905	\$21,025,770	\$344,991,044
Jan 2011	\$9,650,990	\$3,837,258	\$7,149,307	\$4,102,308	\$1,612,409	\$26,352,271
Feb 2011	\$9,487,973	\$3,540,956	\$6,868,464	\$3,907,628	\$1,455,475	\$25,260,495
Mar 2011	\$10,898,895	\$4,079,469	\$7,687,294	\$4,625,320	\$1,746,852	\$29,037,831
Apr 2011	\$9,916,715	\$3,813,120	\$7,260,048	\$4,141,006	\$1,561,775	\$26,692,665
May 2011	\$10,271,940	\$3,941,258	\$7,400,327	\$4,348,752	\$1,628,094	\$27,590,372
Jun 2011	\$10,609,630	\$3,971,902	\$7,578,637	\$4,412,970	\$1,677,034	\$28,250,173
Jul 2011	\$10,211,252	\$4,024,095	\$7,584,618	\$4,408,471	\$1,615,634	\$27,844,070
Aug 2011	\$10,707,954	\$4,309,480	\$8,369,529	\$4,824,657	\$1,859,165	\$30,070,785
Sep 2011	\$10,547,716	\$4,261,705	\$7,865,296	\$4,837,910	\$1,708,065	\$29,220,693
Oct 2011	\$11,174,678	\$4,300,079	\$7,962,506	\$4,888,513	\$1,836,986	\$30,162,761
Nov 2011	\$11,071,987	\$4,213,746	\$7,957,619	\$4,611,171	\$1,840,880	\$29,695,402
Dec 2011	\$12,057,724	\$4,373,260	\$8,358,270	\$5,066,812	\$2,005,512	\$31,861,579

<sup>\*</sup> Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

<u>Claims Costs</u> (continued)
The following tables represent incurred claims by Plan for 2004-2010 and monthly year-to-date for 2011.

#### **INCURRED MEDICAL CLAIMS (no Rx) by PLAN:**

	Commonwealth									
Time Period	Enhanced	Essential	Premier	Select	Capitol Choice	Standard PPO	Maximum Choice	Optimum PPO	Missing*	Total
2005	224,106,646	5,699,906	398,937,012	870	0	0	0	0	3,206,256	631,950,690
2006	288,475,412	5,444,088	450,349,287	2,662	12,098	2,313	2,001	80,928	3,974,007	748,342,797
2007	338,717,549	5,049,175	499,351,543	7,241,677	8,146	2,173	10,878	65,746	3,721,482	854,168,370
2008	378,025,074	5,426,578	549,135,738	12,042,184	192,471	30,902	155,016	1,237,182	3,581,995	949,827,140
2009	30,875	0	107,859	9,005	115,052,390	14,550,862	44,250,277	839,555,872	4,290,752	1,017,847,892
2010	N/A	N/A	N/A	N/A	120,934,458	15,284,116	56,099,406	894,470,472	6,812,512	1,093,600,964
Jan-11	N/A	N/A	N/A	N/A	10,382,099	4,099,370	65,517,047	2,178,062	305,188	82,481,765
Feb-11	N/A	N/A	N/A	N/A	11,071,617	4,250,684	64,187,982	2,496,871	369,182	82,376,335
Mar-11	N/A	N/A	N/A	N/A	11,486,883	5,323,683	78,377,906	3,165,963	312,959	98,667,393
Apr-11	N/A	N/A	N/A	N/A	10,988,803	5,585,545	69,566,374	3,020,667	569,915	89,731,305
May-11	N/A	N/A	N/A	N/A	11,669,223	5,697,908	70,023,534	2,842,964	835,528	91,069,158
Jun-11	N/A	N/A	N/A	N/A	13,387,897	6,004,352	80,122,192	3,279,003	386,088	103,179,531
Jul-11	N/A	N/A	N/A	N/A	13,040,326	6,350,695	70,358,667	3,372,021	379,369	93,501,078
Aug-11	N/A	N/A	N/A	N/A	12,242,939	6,415,924	72,721,753	3,490,547	738,763	95,609,926
Sep-11	N/A	N/A	N/A	N/A	12,589,631	5,961,995	69,762,412	3,460,515	877,756	92,652,309
Oct-11	N/A	N/A	N/A	N/A	13,053,565	6,857,422	72,393,304	4,306,176	463,639	97,074,107
Nov-11	N/A	N/A	N/A	N/A	11,537,831	6,984,635	74,119,603	3,777,575	1,124,362	97,544,006
Dec-11	N/A	N/A	N/A	N/A	13,370,468	7,747,244	78,919,764	3,867,703	777,615	104,682,795

<sup>\*</sup>Missing means the claims could not be tagged to a specific plan.

The following tables represent incurred claims by Plan for 2004-2010 and monthly year-to-date for 2011.

## **INCURRED Rx CLAIMS (no Med) by PLAN:**

#### Commonwealth

Time Period	Enhanced	Essential	Premier	Select	Capitol Choice	Standard PPO	Maximum Choice	Optimum PPO	Missing*	Total
2005	\$54,479,575	\$1,131,785	\$97,251,249	\$22	\$0	\$0	\$0	\$0	\$549,273	\$182,825,330
2006	\$86,176,113	\$1,164,651	\$148,805,657	\$185	\$129	\$70	\$460	\$3,784	\$977,662	\$237,128,711
2007	\$98,794,003	\$968,767	\$162,084,866	\$1,413,084	\$252	\$1,366	\$0	\$9,536	\$484,891	\$263,756,765
2008	\$114,041,269	\$986,314	\$180,478,736	\$1,932,466	\$12,238	\$2,409	\$3,948	\$89,254	\$602,777	\$298,149,411
2009	\$15,498	\$11	\$39,805	\$2,289	\$35,845,894	\$3,632,729	\$7,804,096	\$267,798,635	\$627,662	\$315,766,619
2010	\$0	\$0	\$0	\$0	\$37,407,219	\$3,837,292	\$10,541,237	\$292,441,780	\$763,517	\$344,991,044
Jan-11	\$0	\$0	\$0	\$0	\$3,527,393	\$141,861	\$22,075,812	\$558,546	\$48,659	\$26,352,271
Feb-11	\$0	\$0	\$0	\$0	\$3,290,309	\$378,222	\$20,959,462	\$595,728	\$36,774	\$25,260,495
Mar-11	\$0	\$0	\$0	\$0	\$3,917,222	\$724,709	\$23,710,145	\$643,162	\$42,592	\$29,037,831
Apr-11	\$0	\$0	\$0	\$0	\$3,480,498	\$825,003	\$21,701,909	\$654,935	\$30,320	\$26,692,665
May-11	\$0	\$0	\$0	\$0	\$3,541,226	\$1,025,752	\$22,343,608	\$643,991	\$35,794	\$27,590,372
Jun-11	\$0	\$0	\$0	\$0	\$3,662,646	\$1,165,483	\$22,699,863	\$680,032	\$42,148	\$28,250,173
Jul-11	\$0	\$0	\$0	\$0	\$3,558,478	\$1,261,636	\$22,351,351	\$632,482	\$40,123	\$27,844,070
Aug-11	\$0	\$0	\$0	\$0	\$3,904,645	\$1,481,772	\$23,914,284	\$711,189	\$58,896	\$30,070,785
Sep-11	\$0	\$0	\$0	\$0	\$3,742,739	\$1,510,385	\$23,247,755	\$686,513	\$33,300	\$29,220,693
Oct-11	\$0	\$0	\$0	\$0	\$3,806,433	\$1,524,700	\$24,032,117	\$750,262	\$49,249	\$30,162,761
Nov-11	\$0	\$0	\$0	\$0	\$3,809,064	\$1,597,587	\$23,513,415	\$717,493	\$57,843	\$29,695,402
Dec-11	\$0	\$0	\$0	\$0	\$4,047,906	\$2,021,672	\$24,959,853	\$773,005	\$59,142	\$31,861,579

<sup>\*</sup>Missing means the claims could not be tagged to a specific plan.

The following represents incurred medical claims only (does not include Rx) by Coverage Level for 2004-2010 and monthly year-to-date for 2011.

## INCURRED MEDICAL CLAIMS (no Rx) by Coverage Level:

Time Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2004	\$79,155,863	\$103,820,755	\$86,067,017	\$316,270,259	\$5,091,095	\$590,404,989
2005	\$87,262,576	\$118,825,706	\$89,324,478	\$333,524,271	\$3,206,647	\$632,143,678
2006	\$105,900,696	\$142,637,212	\$104,245,315	\$391,585,566	\$3,974,007	\$748,342,797
2007	\$123,989,294	\$160,349,021	\$118,430,067	\$447,682,122	\$3,721,482	\$854,171,987
2008	\$138,340,738	\$179,204,916	\$138,984,028	\$489,769,922	\$3,527,536	\$949,827,140
2009	\$148,834,766	\$197,496,335	\$148,195,132	\$519,153,082	\$4,168,576	\$1,017,847,892
2010	\$161,672,831	\$207,626,168	\$169,013,842	\$548,555,387	\$6,732,736	\$1,093,600,964
Jan 2011	\$12,238,450.49	\$15,585,451.18	\$13,100,155.49	\$41,257,152.76	\$300,555.05	\$82,481,764.97
Feb 2011	\$12,172,418.19	\$16,633,217.84	\$13,100,031.92	\$40,101,652.03	\$369,015.45	\$82,376,335.43
Mar 2011	\$13,606,133.50	\$20,383,774.54	\$15,286,546.79	\$49,081,114.34	\$309,824.18	\$98,667,393.35
Apr 2011	\$12,730,497.42	\$19,169,038.22	\$13,734,002.81	\$43,528,514.72	\$569,251.49	\$89,731,304.66
May 2011	\$13,044,390.57	\$18,626,113.40	\$14,206,826.07	\$44,356,910.68	\$834,916.92	\$91,069,157.64
Jun 2011	\$13,718,998.97	\$19,812,681.83	\$17,251,180.57	\$52,011,090.98	\$385,578.51	\$103,179,530.86
Jul 2011	\$12,501,152.74	\$18,735,501.67	\$16,251,652.29	\$45,633,628.24	\$379,143.44	\$93,501,078.38
Aug 2011	\$13,414,510.65	\$19,198,432.02	\$15,111,813.59	\$47,189,107.95	\$696,062.10	\$95,609,926.31
Sep 2011	\$13,124,024.46	\$18,199,395.95	\$15,405,690.12	\$45,045,448.54	\$877,749.89	\$92,652,308.96
Oct 2011	\$14,230,500.39	\$20,390,986.53	\$16,281,187.20	\$45,708,238.81	\$463,193.83	\$97,074,106.76
Nov 2011	\$12,923,159.43	\$20,322,845.03	\$15,664,022.49	\$47,510,844.04	\$1,123,134.92	\$97,544,005.91
Dec 2011	\$13,944,479.19	\$22,265,035.97	\$17,045,610.15	\$50,650,119.56	\$777,550.28	\$104,682,795.15

<sup>\*</sup>Unable to tag claims to a specific coverage level

The following represents incurred medical claims only (does not include Rx) by Coverage Level for 2004-2010 and monthly year-to-date for 2011.

#### INCURRED Rx CLAIMS (no Med) by Coverage Level:

Time Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2004	\$25,937,109	\$29,646,733	\$19,042,131	\$93,046,913	\$824,066	\$168,496,952
2005	\$28,909,801	\$34,195,948	\$19,163,801	\$99,866,288	\$689,492	\$182,825,330
2006	\$38,228,159	\$43,809,856	\$25,948,520	\$128,164,514	\$977,662	\$237,128,711
2007	\$42,590,719	\$49,329,230	\$29,736,616	\$141,680,238	\$484,865	\$263,821,668
2008	\$48,563,951	\$54,628,661	\$34,879,637	\$159,504,290	\$572,873	\$298,149,411
2009	\$51,545,047	\$59,726,568	\$37,315,867	\$166,599,775	\$579,363	\$315,766,619
2010	\$57,196,848	\$64,932,666	\$41,140,849	\$181,004,388	\$716,292	\$344,991,044
Jan 2011	\$4,359,980.33	\$4,650,212.16	\$3,348,148.76	\$13,950,690.10	\$43,239.46	\$26,352,271
Feb 2011	\$4,070,054.82	\$4,704,259.69	\$3,329,338.48	\$13,124,057.39	\$32,785.09	\$25,260,495
Mar 2011	\$4,703,923.55	\$5,434,124.36	\$3,818,876.13	\$15,050,424.79	\$30,481.80	\$29,037,831
Apr 2011	\$4,479,625.96	\$5,075,421.89	\$3,279,549.52	\$13,830,020.78	\$28,047.22	\$26,692,665
May 2011	\$4,560,280.30	\$5,332,646.02	\$3,453,397.82	\$14,211,684.51	\$32,362.88	\$27,590,372
Jun 2011	\$4,671,074.37	\$5,493,940.48	\$3,534,690.36	\$14,512,993.34	\$37,474.06	\$28,250,173
Jul 2011	\$4,637,862.53	\$5,488,567.31	\$3,331,469.16	\$14,350,876.58	\$35,294.44	\$27,844,070
Aug 2011	\$4,914,465.98	\$5,898,269.80	\$3,723,929.32	\$15,484,314.98	\$49,804.68	\$30,070,785
Sep 2011	\$4,717,894.20	\$5,892,271.58	\$3,632,204.68	\$14,947,120.46	\$31,201.90	\$29,220,693
Oct 2011	\$4,960,921.78	\$6,088,830.22	\$3,807,806.56	\$15,270,564.15	\$34,638.64	\$30,162,761
Nov 2011	\$4,780,759.98	\$5,993,007.80	\$3,791,435.92	\$15,086,951.12	\$43,247.39	\$29,695,402
Dec 2011	\$5,078,785.79	\$6,619,666.20	\$4,189,261.14	\$15,919,608.05	\$54,257.62	\$31,861,579

<sup>\*</sup>Unable to tag claims to a specific coverage level

#### Medical Claims Utilization

The following is based on medical claims\* (does not include Rx) incurred for Jan-Dec 2011.

Commonwealth Plan	Admits Per 1000 Acute	Admits Per 1000 Acute {Rcnt SGovt}	%Diff from {Rcnt SGovt}	Days LOS Admit Acute	Admit Acuta	%Diff from {Rcnt SGovt}	Days Per 1000 Adm Acute	Days Per 1000 Adm Acute {Rcnt SGovt}	%Diff from {Rcnt SGovt}
Capitol Choice	60.12	72.63	-17.22%	3.97	3.92	2.20%	239.49	285.78	-16.20%
Maximum Choice	57.69	61.34	-5.95%	3.91	4.04	-2.21%	227.97	232.8	-2.07%
Optimum PPO	86.02	70.32	22.33%	4.05	3.98	1.94%	347.89	285.47	21.86%
Standard PPO	56.94	66.40	-14.24%	3.90	4.06	-1.16%	223.63	256.96	-12.97%
Total	65.19	67.67	-3.66%	3.96	4.00	-1.10%	259.75	265.25	-2.08%

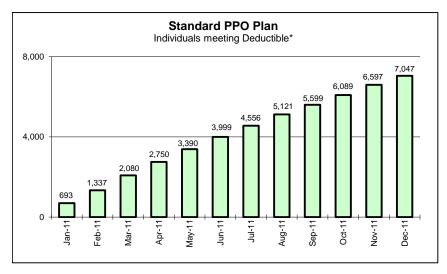
Commonwealth Plan	Visits Per 1000 Office Med	Visits Per 1000 Office Med {Rcnt SGovt}	%Diff from {Rcnt SGovt}	Visits Per 1000 ER	Visits Per 1000 ER {Rcnt SGovt}	%Diff from {Rcnt SGovt}
Capitol Choice	7,397.79	8,094.98	-8.61%	197.33	229.09	-13.86%
Maximum Choice	6,183.50	6,886.05	-10.20%	202.55	226.05	-10.40%
Optimum PPO	9,234.02	8,047.66	14.74%	259.88	226.08	14.95%
Standard PPO	4,848.46	7,267.61	-33.29%	214.61	227.28	-5.57%
Total	6,915.94	7,574.07	-9.34%	218.59	227.12	-3.72%

Commonwealth Plan	Svcs Per 1000 OP Lab	Svcs Per 1000 OP Lab {Rcnt US}	%Diff from {Rcnt US}	Svcs Per 1000 OP Rad	Svcs Per 1000 OP Rad {Rcnt US}	%Diff from {Rcnt US}
Capitol Choice	8,421.61	7,876.42	6.92%	2,615.62	2,352.46	11.19%
Maximum Choice	6,775.41	6,220.12	8.93%	1,905.60	1,707.81	11.58%
Optimum PPO	11,022.74	7,617.78	44.70%	3,288.22	2,313.36	42.14%
Standard PPO	5,938.03	6,830.25	-13.06%	1,791.99	1,920.74	-6.70%
Total	8,039.45	7,136.14	11.87%	2,400.36	2,073.59	14.55%

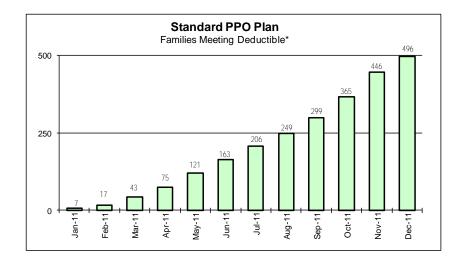
<sup>\*</sup>Services are tracked by each service, not by each visit. Therefore, if two laboratory services are performed at one visit, it will count as two services.

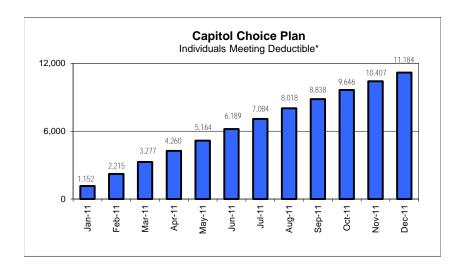
#### **Analysis of Individuals and Families Meeting Their Deductibles**

The following details the number of individuals and families by plan that met their deductible for the latest rolling year. This report is based on incurred claims.

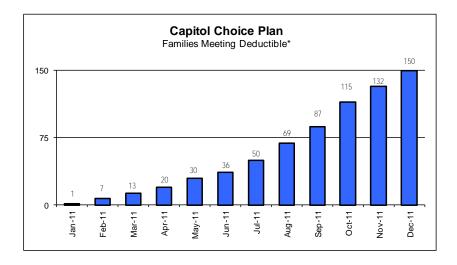








\* 2010 Individual Deductible was \$500; in 2011, Individual Deductible is \$575.

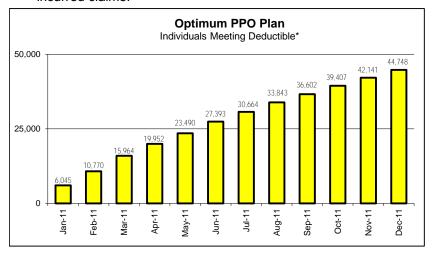


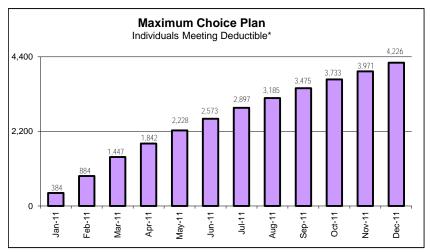
<sup>\* 2010</sup> and 2011 Family Deductible is \$1,500

<sup>\* 2010</sup> Family Deductible was \$1,500; in 2011, Family Deductible is \$1,725.

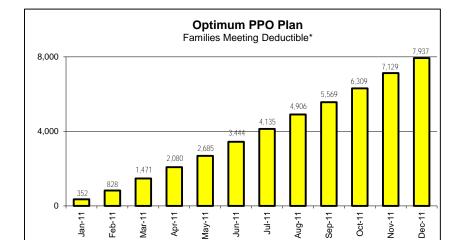
#### Analysis of Individuals and Families Meeting Their Deductibles (continued)

The following details the number of individuals and families by plan that met their deductible for the latest rolling year. This report is based on incurred claims.

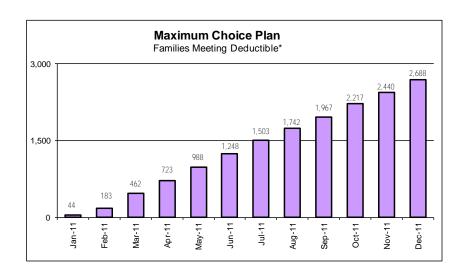




<sup>\* 2010</sup> Individual Deductible was \$300; in 2011, Individual Deductible is \$345.



<sup>\* 2010</sup> Individual Deductible was \$2,000; in 2011, Individual Deductible is \$2,300.

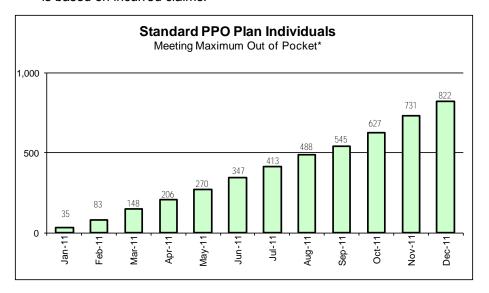


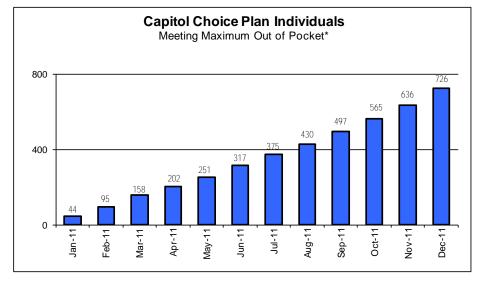
<sup>\* 2010</sup> Family Deductible was \$600; in 2011, Family Deductible is \$690.

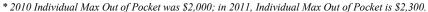
<sup>\* 2010</sup> Family Deductible was \$3,000; in 2011, Family Deductible is \$3,455.

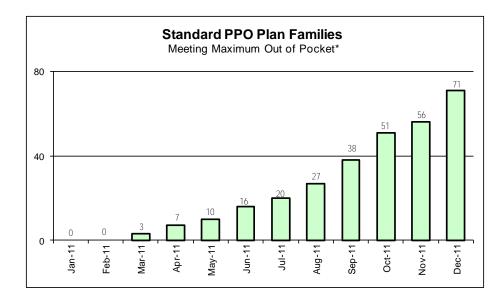
#### Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses (continued)

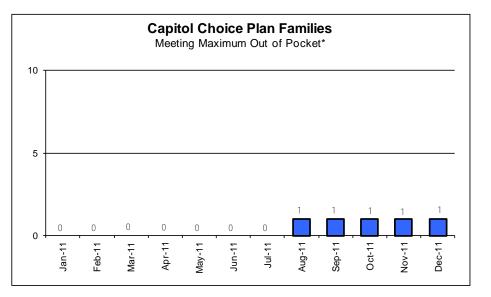
The following details the number of individuals and families by plan that met their maximum out of pocket expense for the latest rolling year. This report is based on incurred claims.











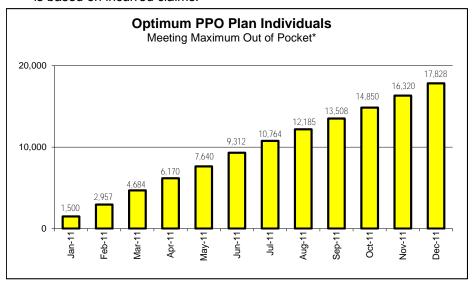
<sup>\* 2010</sup> and 2011 Individual Maximum Out of Pocket is \$3,500

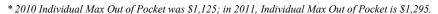
<sup>\* 2010</sup> and 2011 Family Maximum Out of Pocket is \$7,000

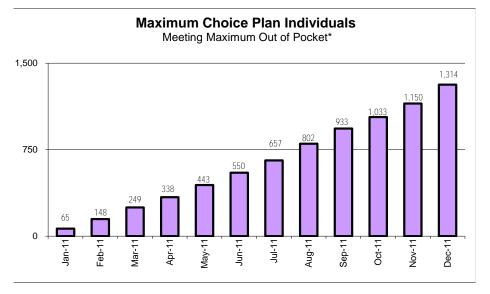
<sup>\* 2010</sup> Family Max Out of Pocket was \$6,000; in 2011, Family Max Out of Pocket is \$6,900.

#### Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses (continued)

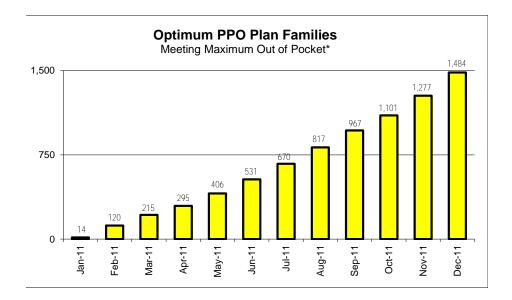
The following details the number of individuals and families by plan that met their maximum out of pocket expense for the latest rolling year. This report is based on incurred claims.

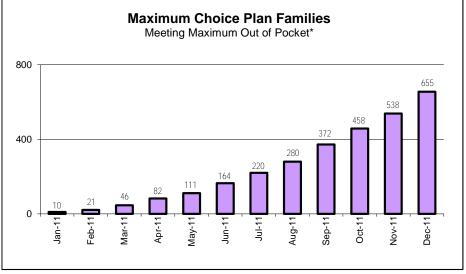






\* 2010 Individual Max Out of Pocket was \$3,000; in 2011, Individual Max Out of Pocket is \$3,455.





<sup>\* 2010</sup> Family Max Out of Pocket was \$2,250; in 2011, Family Max Out of Pocket is \$2,590.

<sup>\* 2010</sup> Family Max Out of Pocket was \$4,500; in 2011, Family Max Out of Pocket is \$5,185.

# Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out of Pocket Expenses (continued)

The following details the number of individuals and families by plan that met their deductibles and/or maximum out of pocket expense for the years 2005-2011 This report is based on incurred claims.

		Individuals	and Familie	s in Essenti	al (2005-08) a	nd Standard	PPO (2009	-11)	
			Individuals Families						
Plan year	Plan Name	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting Max Out of Pocket	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting Max Out of Pocket
2005	Essential	\$750	18.58%	\$3,500	1.14%	\$1,500	11.69%	\$7,000	0.22%
2006	Essential	\$750	22.14%	\$3,500	2.96%	\$1,500	16.35%	\$7,000	1.08%
2007	Essential	\$750	22.41%	\$3,500	3.30%	\$1,500	17.70%	\$7,000	1.16%
2008	Essential	\$750	24.25%	\$3,500	4.01%	\$1,500	19.35%	\$7,000	1.51%
2009	Standard PPO	\$750	32.06%	\$3,500	5.85%	\$1,500	8.74%	\$7,000	1.14%
2010	Standard PPO	d PPO \$500 <b>38.12</b> % \$3,500 <b>4.81</b> %					3.61%	\$7,000	0.73%
In 2011	Standard PPO	\$500	38.96%	\$3,500	4.54%	\$1,500	3.84%	\$7,000	0.55%

	Individuals and Families in Enhanced (2005-08) and Capitol Choice (2009-11)												
			Indiv	riduals			Far	milies					
Plan year								Max Out of Pocket	Percent Meeting Max Out of Pocket				
2005	Enhanced	\$250	19.30%	\$1,250	3.33%	\$500	6.72%	\$2,500	0.31%				
2006	Enhanced	\$250	21.52%	\$1,250	5.80%	\$500	9.95%	\$2,500	0.94%				
2007	Enhanced	\$250	21.31%	\$1,250	7.48%	\$500	8.93%	\$2,500	1.00%				
2008	Enhanced	\$250	21.95%	\$1,250	8.11%	\$500	9.06%	\$2,500	1.20%				
2009	Capitol Choice	\$500	27.85%	\$2,000	1.86%	\$1,500	0.59%	\$6,000	0.01%				
2010	Capitol Choice	\$500	25.19%	\$2,000	1.84%	\$1,500	0.49%	\$6,000	0.01%				
In 2011	Capitol Choice	\$575	24.87%	\$2,300	1.61%	\$1,725	0.43%	\$6,900	0.00%				

# Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out of Pocket Expenses (continued)

The following details the number of individuals and families by plan that met their deductibles and/or maximum out of pocket expense for the years 2005-2011 This report is based on incurred claims.

		Individuals	and Famili	<mark>es in Premie</mark>	<mark>er (2005-08) ar</mark>	nd Optimum	PPO (2009-	11)	
	Individuals Families								
Plan year	Plan Name	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting Max Out of Pocket	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting Max Out of Pocket
2005	Premier	\$250	27.80%	\$1,000	3.38%	\$500	6.72%	\$2,000	0.54%
2006	Premier	\$250	30.15%	\$1,000	6.70%	\$500	9.95%	\$2,000	1.17%
2007	Premier	\$250	30.04%	\$1,000	7.78%	\$500	8.93%	\$2,000	1.20%
2008	Premier	\$250	30.51%	\$1,000	8.60%	\$500	9.06%	\$2,000	1.26%
2009	Optimum PPO	\$250	27.18%	\$1,125	10.05%	\$500	8.42%	\$2,250	1.51%
2010	Optimum PPO	\$300	25.80%	\$1,125	10.89%	\$600	7.05%	\$2,250	1.47%
In 2011	Optimum PPO	\$345	25.11%	\$1,295	10.00%	\$690	7.22%	\$2,590	1.35%

	Individuals and Families in Select (2007-08) and Maximum Choice (2009-11)											
		Far	Families									
Plan year	Plan Name	Deductible	Percent Meeting Deductible	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting Max Out of Pocket					
2007	Select	\$2,000	11.72%	\$3,000	3.01%	\$3,000	18.50%	\$4,500	2.61%			
2008	Select	\$2,000	12.81%	\$3,000	3.63%	\$3,000	20.03%	\$4,500	3.91%			
2009	Maximum Choice	\$2,000	14.90%	\$3,000	4.52%	\$3,000	15.96%	\$4,500	3.64%			
2010	Maximum Choice	\$2,000	15.12%	\$3,000	4.91%	\$3,000	16.78%	\$4,500	4.13%			
In 2011	Maximum Choice	\$2,300	14.51%	\$3,455	4.51%	\$3,455	18.08%	\$5,185	4.40%			

## **Premium (or Premium Equivalent)**

The following details the amount of premium\* (or premium equivalent) paid by the employee and employer for 2004-2011 and monthly through 2012.

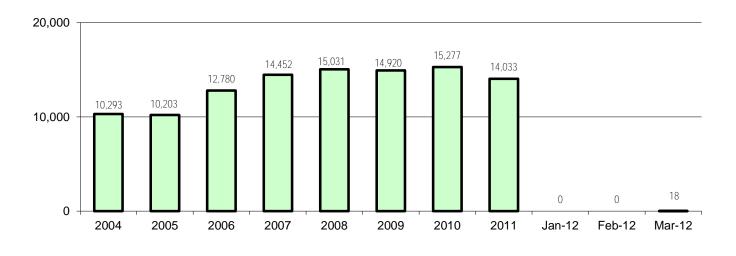
Time Period	Employee Premium Amount	Employer Premium Amount	Total Premium Amount
2004	\$213,004,714	\$492,025,888	\$705,030,602
2005	\$143,746,542	\$808,691,861	\$952,438,403
2006	\$153,787,780	\$948,458,338	\$1,102,246,118
2007	\$153,512,327	\$892,677,935	\$1,046,190,262
2008	\$179,094,322	\$1,039,574,462	\$1,218,668,784
2009	\$210,980,360	\$1,190,104,292	\$1,401,084,653
2010	\$223,160,749	\$1,325,801,265	\$1,548,962,014
2011	\$274,375,886	\$1,324,091,690	\$1,598,467,575
Jan 2012	\$22,941,760	\$112,338,099	\$135,279,859
Feb 2012	\$22,908,184	\$112,091,093	\$134,999,277
Mar 2012	\$22,877,102	\$112,159,025	\$135,036,127

<sup>\*</sup>Premium (or premium equivalent) is based on enrollment using published premium rates—it is NOT based on actual payments received.

## **Prescription Drug Utilization**

The following details the number of families that have purchased 75 scripts or more during 2004-2011 and by month for 2012. After a family has filled 75 prescriptions via retail purchase, the co-payment is reduced to \$20 for 2nd tier and \$35 for 3rd tier.





The table below summarizes plan impact for families regarding the scripts benefit in 2012:

Script Count, per Family	Number of Families	Number of Scripts	Avg. # of Scripts per Patient	Avg. Net Payment per Script	Net Payments For All Scripts
0 - 75	114,616	1,067,365	6.61	\$66.97	\$71,483,962.02
over 75	18	1,546	36.81	\$76.16	\$117,740.33
Totals	114,634	1,068,911	6.61	\$66.99	\$71,601,702.35

## **Prescription Drug Utilization** (continued)

The following details the type of prescription filled, the percent that were generic, and the generic efficiency rate for the most recent rolling year. Based on paid claims..

Time Period	Generic	Brand Name, Generic Available	Brand Name	Other*	Total	Scripts Rx % Generic	Scripts Generic Efficiency Rx
Apr 2011	288,013	15,569	84,532	15,066	403,180	71.44%	94.87%
May 2011	348,892	19,156	102,641	19,063	489,752	71.24%	94.80%
Jun 2011	282,704	15,883	85,213	16,241	400,041	70.67%	94.68%
Jul 2011	272,850	15,775	80,749	9,706	379,080	71.98%	94.53%
Aug 2011	336,425	19,172	98,926	11,598	466,121	72.18%	94.61%
Sep 2011	285,163	15,691	84,474	9,967	395,295	72.14%	94.78%
Oct 2011	295,420	16,415	92,206	10,223	414,264	71.31%	94.74%
Nov 2011	359,420	23,544	103,336	13,524	499,824	71.91%	93.85%
Dec 2011	293,367	19,793	79,292	12,278	404,730	72.48%	93.68%
Jan 2012	368,448	23,804	95,675	13,069	500,996	73.54%	93.93%
Feb 2012	301,119	19,605	74,924	9,980	405,628	74.24%	93.89%
Mar 2012	292,125	19,105	74,719	9,435	395,384	73.88%	93.86%

<sup>\*</sup>Includes: Over the Counter (usually items such as diabetic supplies, syringes, and test strips, etc.), Other/Unavailable or Missing (Unable to tag to a specific group.

## **Prescription Drug Utilization** (continued)

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred Claims.

Time Period	Members	Patients	Scripts	Scripts Per Member	Scripts Per Patient	Allow Amt* Per Script	Net Pay Per Script	Member Cost Per Script	Patient Cost Per Script
Jan 2011	268,680	170,712	448,186	1.66	3.07	\$75.25	\$58.80	\$27.45	\$43.20
Feb 2011	268,965	171,250	429,532	1.59	2.93	\$74.79	\$58.81	\$25.52	\$40.08
Mar 2011	269,519	176,287	476,527	1.76	3.14	\$76.42	\$60.94	\$27.38	\$41.86
Apr 2011	269,935	166,976	423,972	1.57	2.99	\$78.08	\$62.96	\$23.75	\$38.40
May 2011	269,723	168,106	435,485	1.61	3.03	\$78.13	\$63.36	\$23.85	\$38.27
Jun 2011	269,728	167,420	426,986	1.58	3.04	\$80.81	\$66.16	\$23.18	\$37.35
Jul 2011	269,026	165,180	405,769	1.50	2.98	\$83.16	\$68.62	\$21.92	\$35.71
Aug 2011	268,370	169,972	435,369	1.62	3.07	\$83.39	\$69.07	\$23.23	\$36.68
Sep 2011	267,090	167,955	424,964	1.59	3.02	\$82.77	\$68.76	\$22.29	\$35.45
Oct 2011	270,710	176,362	438,270	1.61	3.02	\$82.53	\$68.82	\$22.19	\$34.06
Nov 2011	270,321	171,057	432,454	1.59	3.00	\$82.31	\$68.67	\$21.83	\$34.49
Dec 2011	270,668	170,338	453,356	1.67	3.10	\$83.84	\$70.28	\$22.71	\$36.09

<sup>\*&</sup>quot;Allow Amt" is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.

## **Prescription Drug Utilization** (continued)

The following Top 25 Drug Analysis is based on Rx claims incurred January—December 2011

Prev- Rank	Curr Rank	Product Name	Brand/Generic	Therapeutic Classes	Net Pay Rx	Net Pay Rx as Pct of All Drugs	Scripts Rx	Net Pay Per Day Supply Rx	Patients Rx
1	1	NEXIUM	Single source brand	Gastrointestinal Drugs	\$10,299,379.43	100%	46,446	6	7,448
2	2	CRESTOR	Single source brand	Cardiovascular Agents	\$10,080,685.34	100%	72,390	4	12,868
3	3	SINGULAIR	Single source brand	Respiratory Tract Agents	\$8,450,458.38	100%	60,571	4	12,005
4	4	HUMIRA	Single source brand	Immunosuppressants	\$6,938,825.47	100%	2,648	73	474
5	5	ENBREL	Single source brand	Immunosuppressants	\$6,937,870.77	100%	2,713	71	483
6	6	CYMBALTA	Single source brand	Central Nervous System	\$6,725,584.26	100%	34,910	5	5,601
7	7	PLAVIX	Single source brand	Blood Form/Coagul Agents	\$6,106,643.11	100%	31,043	5	4,547
8	8	COPAXONE	Single source brand	Misc Therapeutic Agents	\$5,302,682.40	100%	1,126	117	169
9	9	ABILIFY	Single source brand	Central Nervous System	\$4,708,015.23	100%	8,452	16	1,807
10	10	ACTOS	Single source brand	Hormones & Synthetic Subst	\$4,550,461.50	100%	17,257	7	2,836
-	11	OMEPRAZOLE	Multisource generic	Gastrointestinal Drugs	\$4,110,442.22	0%	107,451	1	22,047
11	12	LIPITOR	Single source brand	Cardiovascular Agents	\$3,667,782.06	100%	24,037	4	3,978
12	13	LEXAPRO	Single source brand	Central Nervous System	\$3,418,296.98	100%	33,239	3	5,449
15	14	JANUVIA	Single source brand	Hormones & Synthetic Subst	\$3,084,053.90	100%	13,865	6	2,362
14	15	LANSOPRAZOLE	Multisource generic	Gastrointestinal Drugs	\$3,073,354.19	0%	22,821	4	4,599
13	16	VENLAFAXINE HYDROCHLORIDE	Multisource generic	Central Nervous System	\$3,057,428.99	0%	31,921	3	5,184
16	17	LOVAZA	Single source brand	Cardiovascular Agents	\$2,655,891.11	100%	16,557	4	3,259
17	18	BETASERON	Multisource brand, no generic	Misc Therapeutic Agents	\$2,467,702.71	100%	581	111	87
-	19	FLUTICASONE PROPIONATE	Multisource generic	Eye, Ear, Nose Throat	\$2,453,334.94	0%	61,727	1	31,791
18	20	CELEBREX	Single source brand	Central Nervous System	\$2,343,064.18	100%	13,891	4	2,825
19	21	ADVAIR DISKUS 250/50	Single source brand	Hormones & Synthetic Subst	\$2,295,745.30	100%	10,004	6	2,912
20	22	PROVIGIL	Single source brand	Central Nervous System	\$2,217,296.91	100%	2,325	29	382
21	23	LANTUS SOLOSTAR	Single source brand	Hormones & Synthetic Subst	\$2,211,956.00	100%	8,347	7	1,761
22	24	DIOVAN HCT	Single source brand	Cardiovascular Agents	\$2,137,047.34	100%	18,701	3	2,780
23	25	SEROQUEL	Single source brand	Central Nervous System	\$2,113,666.47	100%	6,349	10	1,127

<sup>\*&</sup>quot;Product Name" includes all strengths/formulations of a drug

## <u>Prescription Drug Utilization</u> (continued)

In summary, the top 25 drugs represent 12.43% of total scripts and 32.58% of total Rx expenditures..

Summary	Net Pay Rx	Scripts Rx	Days Supply Rx
Top Drugs	\$111,429,610	650,340	24,483,561
All Product Names	\$342,039,096	5,230,870	160,625,720
Top Drugs as Pct of All Drugs	32.58%	12.43%	15.24%

## **Utilization**

The top 25 clinical conditions based on incurred claims for January—December 2011.

Prev Rank	Curr Rank	Clinical Condition	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER	Patients Med	Net Pay Per Pat Med
1	1	Signs/Symptoms/Oth Cond, NEC	\$66,084,784	\$11,112,711	\$53,734,746	2.37	9.04	379.13	14.73	86059	\$767.90
2	2	Prevent/Admin HIth Encounters	\$59,490,230	\$547,768	\$58,867,769	0.03	5.14	754.92	0.61	159201	\$373.68
3	3	Osteoarthritis	\$48,823,597	\$31,150,824	\$17,564,213	4.44	2.88	208.48	0.71	23433	\$2,083.54
4	4	Gastroint Disord, NEC	\$42,347,661	\$8,489,849	\$33,831,676	2.10	4.03	149.41	21.98	38158	\$1,109.80
5	5	Coronary Artery Disease	\$40,137,920	\$22,155,163	\$17,934,858	3.14	3.52	50.45	2.66	8538	\$4,701.09
6	6	Respiratory Disord, NEC	\$37,048,519	\$10,394,342	\$26,625,988	1.06	4.05	94.10	14.85	30876	\$1,199.91
7	7	Arthropathies/Joint Disord NEC	\$31,805,839	\$3,136,961	\$28,582,140	0.48	3.35	435.86	6.39	56133	\$566.62
8	8	Spinal/Back Disord, Low Back	\$30,266,804	\$8,949,176	\$21,300,461	1.04	3.00	576.16	5.92	33957	\$891.33
9	9	Chemotherapy Encounters	\$29,981,013	\$3,464,253	\$26,516,759	0.64	4.64	1.08	0.01	678	\$44,219.78
10	10	Renal Function Failure	\$27,418,408	\$3,323,150	\$24,034,157	0.58	4.44	17.43	0.56	2780	\$9,862.74
11	11	Pregnancy w Vaginal Delivery	\$22,902,440	\$22,761,452	\$140,451	6.36	2.43	0.62	0.16	2995	\$7,646.89
12	12	Condition Rel to Tx - Med/Surg	\$21,118,462	\$14,606,996	\$6,501,168	2.47	5.26	7.84	2.32	3642	\$5,798.59
13	13	Cardiovasc Disord, NEC	\$18,966,090	\$4,282,521	\$14,670,797	1.12	2.92	54.94	10.14	16444	\$1,153.37
14	14	Spinal/Back Disord, Ex Low	\$17,408,748	\$3,057,444	\$14,330,395	0.43	2.56	559.96	3.41	26696	\$652.11
16	15	Newborns, w/wo Complication	\$16,797,812	\$16,235,278	\$562,454	10.18	3.33	5.44	0.20	3479	\$4,828.34
15	16	Cancer - Breast	\$16,601,078	\$1,669,297	\$14,887,093	0.33	2.96	34.68	0.07	2693	\$6,164.53
18	17	Infections - ENT Ex Otitis Med	\$16,557,825	\$437,252	\$16,119,220	0.29	2.53	574.65	7.99	100244	\$165.18
17	18	Cholecystitis/Cholelithiasis	\$16,307,046	\$3,708,562	\$12,597,510	1.01	3.44	6.43	1.77	2730	\$5,973.28
19	19	Urinary Tract Calculus	\$14,109,772	\$1,879,455	\$12,230,214	0.79	2.42	18.22	5.96	4056	\$3,478.74
20	20	Infec/Inflam - Skin/Subcu Tiss	\$13,459,656	\$3,386,706	\$10,035,151	1.48	4.02	260.50	5.87	49442	\$272.23
21	21	Cardiac Arrhythmias	\$13,420,407	\$4,679,051	\$8,739,729	1.10	2.64	39.25	2.30	6465	\$2,075.86
22	22	Diabetes	\$13,283,794	\$2,879,743	\$10,371,289	1.01	4.21	208.60	1.68	25097	\$529.30
24	23	Gynecological Disord, NEC	\$12,233,143	\$1,039,862	\$11,192,830	0.31	2.33	84.92	1.78	21385	\$572.04
23	24	ENT Disorders, NEC	\$11,981,310	\$489,737	\$11,490,331	0.13	3.81	655.77	2.75	41514	\$288.61
25	25	Fracture/Disloc - Upper Extrem	\$11,699,796	\$1,594,931	\$10,100,377	0.28	3.38	72.46	7.39	7749	\$1,509.85

NOTE: Medical payments represent only the payments made for the specified condition.

## <u>**Utilization**</u> (continued)

In Summary, the top clinical conditions represent more than 57.62% of total paid claims for all clinical conditions.

Summary	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER
Top Clinical Conditions	\$650,252,154	\$185,432,484	\$462,961,777	43.17	3.65	5,251.28	122.21
All Clinical Conditions	\$1,128,569,708	\$330,389,684	\$794,384,007	81.26	3.96	8,324.00	240.87
Top Clinical Conditions as Pct of All Clinical Conditions	57.62%	56.13%	58.28%	53.13%	92.10%	63.09%	50.74%

## **Claims Lag Analysis**

The following claims lag information is based on medical claims (does not include Rx) incurred Jan-Dec 2011.

Plan	Number of Med- ical Claims	Avg Days Lag Per Claim	% Claims Paid Within 30 Days	% Claims Paid Within 60 Days	% Claims Paid Within 90 Days
Capitol Choice	1,258,279	18.6	86.27%	94.16%	96.79%
Maximum Choice	673,064	19.8	85.04%	93.45%	96.32%
Optimum PPO	6,553,565	19.6	85.16%	93.75%	96.57%
Standard PPO	357,906	23.1	81.16%	91.41%	95.18%
~Missing	29,061	30.3	75.41%	88.40%	93.67%
All Plans	8,871,875	19.6	85.12%	93.67%	96.52%

<sup>\*</sup>Missing means the claims could not be tagged to a specific plan.

## Claims Lag Analysis (continued)

The following claims lag information is based on all claims (Medical and Rx) incurred and paid during the most recent rolling year.

	Month Paid						
Service Month	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	
Jan 2011	\$2,209,092.60	\$1,666,830.44	\$800,351.05	\$305,608.49	\$195,287.25	\$62,270.78	
Feb 2011	\$6,392,657.52	\$2,841,149.97	\$789,371.01	\$288,383.31	\$239,582.14	\$123,706.67	
Mar 2011	\$42,602,605.52	\$9,477,233.57	\$3,562,819.24	\$901,353.93	\$1,011,924.48	\$278,028.87	
Apr 2011	\$56,815,869.36	\$47,468,389.62	\$7,057,525.34	\$2,219,727.50	\$1,660,336.41	\$388,660.06	
May 2011		\$65,167,910.25	\$42,981,486.12	\$6,090,742.92	\$2,751,163.46	\$715,938.10	
Jun 2011			\$67,833,745.93	\$47,764,608.63	\$10,732,165.50	\$2,640,107.65	
Jul 2011				\$56,391,107.96	\$51,227,505.69	\$8,494,700.56	
Aug 2011					\$66,189,023.16	\$46,372,173.12	
Sep 2011						\$63,974,806.90	
Oct 2011							
Nov 2011							
Dec 2011							

	Month Paid						
Service Month	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	
Jan 2011	\$146,257.43	\$79,914.89	\$22,922.99	\$15,651.85	\$19,218.03	-\$121,844.79	
Feb 2011	\$129,917.67	\$56,649.14	\$42,176.49	-\$31,719.55	-\$36,471.82	-\$9,183.54	
Mar 2011	\$97,456.78	\$63,535.10	\$65,080.80	-\$28,637.46	\$38,985.21	\$10,859.15	
Apr 2011	\$584,436.80	\$163,316.12	\$26,289.27	\$48,200.51	\$34,049.11	-\$42,830.07	
May 2011	\$454,864.23	\$189,819.52	\$130,102.68	\$123,071.93	\$50,910.97	\$3,518.99	
Jun 2011	\$1,041,568.46	\$440,288.87	\$535,658.32	\$153,238.99	\$293,578.80	-\$5,257.68	
Jul 2011	\$2,620,673.52	\$1,381,201.95	\$519,191.48	\$380,592.09	\$283,049.87	\$47,125.28	
Aug 2011	\$7,995,055.35	\$2,317,854.54	\$1,338,143.44	\$659,722.29	\$355,135.58	\$453,603.59	
Sep 2011	\$45,409,460.54	\$7,083,679.84	\$2,347,552.12	\$1,794,335.01	\$932,066.71	\$331,100.66	
Oct 2011	\$62,636,767.39	\$50,823,546.15	\$8,098,061.33	\$3,021,108.84	\$1,860,456.08	\$796,928.32	
Nov 2011		\$67,886,200.80	\$46,741,596.24	\$7,734,373.38	\$3,489,254.18	\$1,387,983.52	
Dec 2011			\$66,601,419.19	\$55,189,505.65	\$11,208,977.28	\$3,544,471.83	

## **Claims Distribution Based on Age/Gender**

The following is based on claims incurred Jan-Dec 2011.

		Female		Male			
Age Group	Members Avg	Net Pay Med and Rx	Net Pay Per Member	Members Avg	Net Pay Med and Rx	Net Pay Per Member	
Ages < 1	1,232	\$14,777,852.46	\$11,993.39	1,367	\$18,414,687.29	\$13,470.05	
Ages 1-4	5,555	\$11,944,225.37	\$2,150.05	5,857	\$15,177,890.31	\$2,591.45	
Ages 5-9	7,598	\$10,035,881.83	\$1,320.81	7,899	\$14,170,991.23	\$1,793.99	
Ages 10-14	8,381	\$12,735,801.28	\$1,519.54	8,896	\$20,070,707.81	\$2,256.04	
Ages 15-17	5,281	\$14,407,149.28	\$2,728.33	5,595	\$16,359,357.53	\$2,924.19	
Ages 18-19	3,556	\$9,667,424.75	\$2,718.43	3,884	\$7,655,936.09	\$1,971.32	
Ages 20-24	8,759	\$25,436,618.33	\$2,904.11	7,887	\$14,682,993.52	\$1,861.57	
Ages 25-29	8,798	\$33,750,251.40	\$3,836.31	4,675	\$10,796,203.62	\$2,309.22	
Ages 30-34	10,024	\$45,335,955.25	\$4,522.74	5,454	\$14,900,933.41	\$2,732.36	
Ages 35-39	11,166	\$53,601,231.80	\$4,800.47	5,980	\$18,350,321.67	\$3,068.49	
Ages 40-44	13,096	\$67,816,050.05	\$5,178.41	7,042	\$27,208,683.00	\$3,863.54	
Ages 45-49	14,502	\$87,381,072.63	\$6,025.52	8,250	\$44,004,480.29	\$5,334.20	
Ages 50-54	17,407	\$125,401,878.67	\$7,204.18	9,896	\$68,939,177.74	\$6,966.37	
Ages 55-59	20,605	\$165,480,756.30	\$8,030.97	12,698	\$105,955,022.40	\$8,344.50	
Ages 60-64	21,033	\$199,586,247.04	\$9,489.20	13,907	\$149,096,930.49	\$10,720.87	
Ages 65-74	2,242	\$22,878,355.82	\$10,205.58	1,576	\$19,398,751.00	\$12,312.11	
Ages 75-84	146	\$2,750,250.67	\$18,880.44	149	\$2,254,521.58	\$15,147.96	
Ages 85+	9	\$118,252.12	\$13,139.12	2	\$2,265.93	\$1,359.56	

## **Allowed Amount Distribution**

The following table shows the distribution of members for whom the amounts of charges within the specified ranges were allowed. The data appears for the years of 2005—2010 and year to date for 2011.

Allowed Amount	2005	2006	2007	2008	2009	2010	2011
less than 0.00	90	9	16	27	22	37	31
\$0.00 - \$499.99	50,002	54,058	53,891	53,571	53,160	57,375	58,049
\$500.00 - \$999.99	29,232	32,931	33,830	34,248	34,982	34,365	35,861
\$1,000.00 - \$1,999.99	35,407	40,360	42,464	42,360	43,452	42,973	44,034
\$2,000.00 - \$4,999.99	47,471	54,430	56,819	58,612	59,566	60,331	60,195
\$5,000.00 - \$9,999.99	26,210	30,373	32,271	34,487	35,696	36,031	36,252
\$10,000.00 - \$14,999.99	9,138	10,608	11,983	13,272	14,198	14,873	15,013
\$15,000.00 - \$19,999.99	4,055	4,726	5,470	6,332	6,849	7,185	7,339
\$20,000.00 - \$29,999.99	3,539	4,284	5,050	5,930	6,475	6,962	7,133
\$30,000.00 - \$49,999.99	2,312	2,844	3,268	3,820	4,451	4,948	5,109
\$50,000.00 - \$74,999.99	932	1,090	1,306	1,492	1,773	2,022	2,244
\$75,000.00 - \$99,999.99	390	465	536	589	688	829	842
\$100,000.00 - \$149,999.99	299	354	406	499	545	650	695
\$150,000.00 - \$199,999.99	116	117	160	194	203	223	276
\$200,000.00 - \$249,999.99	57	60	81	83	116	119	116
over \$249,999.99	74	99	127	152	166	197	249
Total	209,324	236,808	247,678	255,668	262,342	269,120	273,438

## **Summary of Enrollment and Claims**

The following provides a summary of members, incurred medical claims, and incurred Rx claims for the most recent rolling year.

Time Period	Members	Net Pay Med and Rx	Net Pay Med	Net Pay Rx	Claims Paid	Claims Paid Med	Scripts Rx
Jan 2011	268,680	\$108,834,035.78	\$82,481,764.97	\$26,352,270.81	781,113	319,448	448,186
Feb 2011	268,965	\$107,636,830.90	\$82,376,335.43	\$25,260,495.47	757,127	315,831	429,532
Mar 2011	269,519	\$127,705,223.98	\$98,667,393.35	\$29,037,830.63	851,627	361,884	476,527
Apr 2011	269,935	\$116,423,970.03	\$89,731,304.66	\$26,692,665.37	748,166	311,630	423,972
May 2011	269,723	\$118,659,529.17	\$91,069,157.64	\$27,590,371.53	761,532	312,805	435,485
Jun 2011	269,728	\$131,429,703.47	\$103,179,530.86	\$28,250,172.61	773,667	333,659	426,986
Jul 2011	269,026	\$121,345,148.40	\$93,501,078.38	\$27,844,070.02	731,996	313,015	405,769
Sep 2011	267,090	\$121,873,001.78	\$92,652,308.96	\$29,220,692.82	759,428	320,271	424,964
Aug 2011	268,370	\$125,680,711.07	\$95,609,926.31	\$30,070,784.76	789,825	339,516	435,369
Oct 2011	270,710	\$127,236,868.11	\$97,074,106.76	\$30,162,761.35	794,082	340,769	438,270
Nov 2011	270,321	\$127,239,408.12	\$97,544,005.91	\$29,695,402.21	773,793	326,981	432,454
Dec 2011	270,668	\$136,544,373.95	\$104,682,795.15	\$31,861,578.80	787,364	319,020	453,356

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims (includes medical and Rx) by rolling year.

Time Period	Members	Total Medical and Rx Claims	Total Medical Claims	Total Rx Claims
Jan 2010 - Dec 2010	265,876	1,438,389,045	\$1,093,364,305	\$345,024,740
Jan 2011 - Dec 2011	270,427	1,476,453,633	\$1,134,093,423	\$342,360,211
% Change (Roll Yrs)	1.70%	2.60%	3.70%	-0.80%